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DCHA/OFDA KISAACS, GGOTTLIEB, MMARX, RTHAYER, BDEEMER
AID/W FOR DCHA/OFDA
SOUTH ASIA RESPONSE MANAGEMENT TEAM
SOUTH ASIA EARTHQUAKE TASK FORCE
DCHA/FFP FOR LAUREN LANDIS
ANE DEPUTY ASSISTANT ADMINISTRATOR MARK WARD
BANGKOK FOR OFDA SENIOR REGIONAL ADVISOR TOM DOLAN
KATHMANDU FOR OFDA REGIONAL ADVISOR WILLIAM BERGER
ROME PASS FODAG
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SUBJECT: PAKISTAN - EARTHQUAKE: USAID/DART SITUATION
REPORT #2

SUMMARY

¶11. From October 13 to 15, the USAID/Disaster Assistance Response Team (DART) conducted an assessment in Muzaffarabad. The USAID/DART's assessments confirmed that winterized tents are the priority in earthquake affected areas. The health cluster estimates that 67,000 persons are in need of immediate medical attention, and 13,000 people have been evacuated as of October 15. Participants at the October 15, U.N. Disaster Assessment and Coordination (UNDAC) meeting reported that there is a need for additional field hospitals in more remote areas of Pakistani Kashmir, as well as women health care providers. Operational hospitals lack adequate water supply, and some water treatment units are needed for these facilities and communities. End summary.

USAID/DART Assessment Trip to Muzaffarabad

¶12. From October 13 to 15, three members of the USAID/DART and a U.S. Embassy representative traveled to Muzaffarabad to conduct assessments. The USAID/DART met with the UNDAC team leader, and stated that as of October 13, the local government had called off all search and rescue operations in Muzaffarabad, and all search and rescue teams were being sent home. The UNDAC leader noted that cooperation between the U.N. and the military has been excellent in Muzaffarabad. UNDAC is in the process of starting coordination meetings, and is currently trying to determine which non-governmental organizations (NGOs) are operating in Muzaffarabad. The UNDAC leader noted that there is a lack of coordination with local NGOs.

¶13. According to the USAID/DART, the German government has two helicopters in Muzaffarabad and on October 14, one helicopter traveled north to Neelum, and the other helicopter traveled south to Jhelum. On October 14, the German helicopters evacuated 171 Level One trauma victims.

¶14. The USAID/DART reported that in Muzaffarabad, the International Organization for Migration (IOM) will take the lead in shelter, the U.N. World Health Organization (WHO) in health, and the U.N. World Food Program (WFP) in food.

¶15. On October 14, the USAID/DART was told by an Indian Kashimiri who left Indian Kashmir after the earthquake that a 600-person camp was set up on the road to the airport in Muzaffarabad. The USAID/DART was told that of the 600 camp residents, 50 to 60 people are in tents and the rest are sleeping on the ground. Throughout the team's assessment trip in Muzaffarabad, members were repeatedly told by local residents and government officials that tents were the number one priority. On October 16, three USAID airlifts of relief commodities carrying a total of 1,570 tents are scheduled to arrive in Pakistan. (Note: The USAID/DART is working on a comprehensive shelter strategy. End Note.)

¶16. The team reported that the airport at Muzaffarabad receives four to five C-130 airdrops of food, medical supplies, blankets, and water per day. However, no tents are being delivered. The airdropped items are then airlifted to

affected villages by helicopters or provided to villages on the road to the airport.

¶ 17. The Federal Minister for Communications for Pakistani Kashmir visited the USAID/DART and stated that local officials are having problems accessing affected villages. The USAID/DART reported that the Minister's priorities are tents (assuming 5 persons per family), blankets, and bulldozers or earth moving equipment to dispose of the debris from collapsed houses.

¶ 18. The USAID/DART Health Officer (HO) reported that a 100-bed hospital run by the International Committee of the Red Cross (ICRC) and located in the new stadium will be operational on October 18. The hospital will have a heavy surgical capacity, as well as primary care, OB/GYN, and pediatric services. The hospital will have 2 surgeons, 2 anesthesiologists, and 40 professional personnel, including doctors and nurses.

¶ 19. The USAID/DART HO visited the Pakistani Air Force Hospital at the airport in Muzaffarabad. The hospital opened on October 11 and staff saw 174 patients on that day. Since October 11, hospital staff members have seen between 300 and 350 patients per day. Most of the patients do not stay in the hospital and return to their homes or camps. There are very few inpatients. The hospital has x-ray capability, OB/GYN and labor and delivery services, surgeons, anesthesiologists, and medical doctors. The USAID/DART HO spoke with a doctor at the hospital who told him that tents are the priority.

¶ 10. Medecins sans Frontieres-Belgium (MSF-Belgium) conducted an assessment by road during the week of October 10 and observed that tents are a priority. Jackets and winter coats are also needed since residents will use them to protect themselves from the cold weather and also as minimal shelter.

¶ 11. The USAID/DART HO heliocoptered up to the Jhelum Valley to deliver emergency relief supplies. The road along Jhelum is blocked in multiple places, and only one bridge across the Jhelum River is intact. The USAID/DART HO visited a village where 20 houses were all heavily damaged or completely flattened. The unloading of relief supplies at this village was orderly; however, residents rushed the helicopter with injured people, and the situation became violent as residents fought each other to ensure that their injured relatives could be evacuated.

USAID/DART Trip to Mansehra

¶ 12. On October 14, the USAID/DART Structural Specialist traveled to Mansehra on an assessment trip with the U.S. military and U.S. Embassy representatives. The team scouted forward operation bases and conducted infrastructure assessments. The USAID/DART Structural Specialist reported that Mansehra sustained minimal damage from the earthquake and primarily mud houses on the hills were damaged. Roads in Mansehra are in good condition and are not blocked by debris. The USAID/DART Structural Specialist noted that the bridges in Mansehra were all passable.

Security

¶ 13. The U.N. reported on October 15 that the roads from Balakot to Hajipur are now open. A field hospital that was being transported from Muzaffarabad to Chakoti became stuck at Gahri Dupatta due to landslides blocking the road in both directions. As of October 14, the Pakistani military is deployed on all major roads, and there were no further reports of looting.

Shelter

¶ 14. Participants at the UNDAC team meetings determined that providing shelter for residents affected by the earthquake before winter arrives is the top priority. The Government of Pakistan (GOP) requested that U.N. High Commissioner for Refugees (UNHCR) take the lead in the camp management cluster. As of October 14, UNHCR distributed 2,400 winterized tents, and in the next week several flights will arrive with plastic sheeting and other emergency relief supplies. On October 13, Pakistan's Federal Relief Coordinator requested that the U.N. Resident Coordinator (UNRC) establish camps for residents displaced by the earthquake. The GOP will be responsible for assisting UNHCR identify locations for the camps, logistics, and security. UNHCR will provide all other camp functions, except food which will be provided by the U.N. food cluster. On October 16, UNHCR, accompanied by NGO representatives and 150 tents,

will fly to Muzaffarabad for a site survey. UNHCR is also assessing Balakot and Batagram. UNHCR plans small cluster arrangements versus large tent cities.

¶15. The U.N. remains concerned that the internally displaced person (IDP) camps do not become a quote pull end quote factor attracting large numbers of victims who may be better housed in smaller, spontaneous settlements or elsewhere. The U.N. will make a decision soon on sites for other camps as well as sites for five warehouses for general use. Relief organizations will be able to temporarily store relief supplies in these warehouses before shipping them to beneficiaries. As of October 14, 15,000 tents are available in-country, and 67,000 tents are in the pipeline. Joint shelter assessments will take place starting on October 17. The current gaps in the shelter cluster are mainly procurement shortages; however, solutions, such as supporting local providers to increase the production of tents, are being suggested.

¶16. The Red Cross has 22,000 tents in their pipeline and is setting up production lines. Donors are urged to bring in more tents. UNHCR stated that it is urgent to provide assistance to remote areas in order to avoid mass displacement of people. Helicopter assets are expected to at least double in the next week.

Food

¶17. At the October 14 food cluster meeting, participants stated that the distribution of high energy biscuits (HEB) to earthquake affected persons is continuing in the areas of Mansehra and Muzaffarabad. As of October 14, 30 tons of HEBs have been distributed in Muzaffarabad and 20 tons in Mansehra. NGOs reported that food and relief supplies are being distributed by individuals and communities, and the local procurement of food commodities is progressing. NGOs are concerned that relief supplies are focused in areas such as Muzaffarabad, and many remote villages are not being reached. At present, there is insufficient information available on the nutritional situation of earthquake victims.

Water and Sanitation

¶18. According to the U.N., there is an urgent need for latrines, and sanitary conditions are reportedly poor in all IDP sites. Operational hospitals lack adequate water supply, and some water treatment units need to be provided to these facilities as well as communities.

Health

¶19. The health cluster estimates that 67,000 persons are in need of immediate medical attention, and 13,000 persons have been evacuated as of October 15. The hospitals in Islamabad are filled to capacity. Punjab Province has cleared 3,000 to 5,000 beds for patients to be transferred from Islamabad. WHO reported 8 cases of bloody diarrhea on October 14 and 80 cases on October 15. Participants at the October 15 UNDAC meeting reported that there is a need for additional field hospitals in more remote areas of Pakistani Kashmir as well women health care providers.

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